

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S88584** (5)
1. Corporation Name
MICHAEL JOHN INCORPORATED OF ORANGE PARK

FILED
95 JAN 27 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
8599 110TH ST. NO. 10100 SAN JOSE BLVD.
SEMINOLE FL 34442 JACKSONVILLE FL 32257
PORT SIDE IMPORTS
10100 SAN JOSE BLVD.
JACKSONVILLE FL 32257

2. Principal Place of Business 2a. Mailing Address
21 10100 SAN JOSE BLVD. 26 10100 SAN JOSE BLVD.
JACKSONVILLE, FL 32257
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.
23 City & State 28 City & State
24 Zip 25 Country 29 Zip 30 Country

DO NOT WRITE IN THIS SPACE.
3. Date Incorporated or Qualified 3a. Date of Last Report
10/21/1991 03/29/1994
4. FEI Number Applied For
59-3059250 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
SCARBERRY, MICHAEL J.
8599 110TH ST. NO. 10100 SAN JOSE BLVD.
SEMINOLE FL 34442 JACKSONVILLE, FL 32257
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Type name, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when registering.) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	SCARBERRY, MICHAEL J.	1.2 NAME	
STREET ADDRESS	10100 SAN JOSE BLVD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, JOHN S., II	2.2 NAME	
STREET ADDRESS	6727 126TH AVE. NO.	2.3 STREET ADDRESS	
CITY - ST - ZIP	LARGO FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, JENNIE B.	3.2 NAME	
STREET ADDRESS	8599 110TH ST. NO. DECEASED -	3.3 STREET ADDRESS	
CITY - ST - ZIP	SEMINOLE FL DELETE	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 (if changed), or on an attachment with an address.

SIGNATURE: Michael J. Scarberry MICHAEL J. SCARBERRY 1/25/95 904-262-3006
SIGNATURE AND TYPE (PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)